

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MED/DT		5/30/01
O.I.P.E. CLASSIFIER		49	5/30/01
FORMALITY REVIEW	R.	JC 873	07-02-01
RESPONSE FORMALITY REVIEW	T2	947	10/10/01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

MS  
10-10-1  
See /

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